POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		02-14-01
O.I.P.E. CLASSIFIER	W		7-23-01
FORMALITY REVIEW	H.T.	1117	8-27/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	....	Rejected
=	....	Allowed
—	(Through numeral)...	Canceled
÷	....	Restricted

N	....	Non-elected
I	....	Interference
A	....	Appeal
O	....	Objected

Best Available Copy

Claim	Date		Claim	Date		Claim	Date
Final / Original			Final / Original			Final / Original	
1	✔		51			101	
2	✔		52			102	
3	✔		53			103	
4	✔		54			104	
5	✔		55			105	
6	✔		56			106	
7	✔		57			107	
8	✔		58			108	
9			59			109	
10	✔		60			110	
11	✔		61			111	
12	✔		62			112	
13	✔		63			113	
14	✔		64			114	
15	✔		65			115	
16	✔		66			116	
17			67			117	
1	18		68			118	
2	19		69			119	
3	20		70			120	
4	21		71			121	
5	22		72			122	
6	23		73			123	
7			74			124	
			75			125	
	26		76			126	
8	27		77			127	
9	28	✔	78			128	
10	29		79			129	
11	30	✔	80			130	
12	31	✔	81			131	
13	32		82			132	
14	33		83			133	
15	34		84			134	
16	35		85			135	
17	36		86			136	
18	37	✔	87			137	
19	38	✔	88			138	
	39		89			139	
	40		90			140	
	41		91			141	
	42		92			142	
	43		93			143	
	44		94			144	
	45		95			145	
	46		96			146	
	47		97			147	
	48		98			148	
	49		99			149	
	50		100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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